ILHIE Public Health Work Group
Meeting Minutes
December 15, 2011
3:30pm-4:30pm

Attendees – by phone:
Chair: Mary Driscoll, Illinois Department of Public Health (IDPH)
David Carvalho, IDPH
Mark Chudzinski, Office of Health Information Technology (OHIT)
Dr. Craig Conover, IDPH
Peter Eckart, Illinois Public Health Institute
Mark Flotow, IDPH
Krysta Heaney, OHIT
Robin Holding, IDPH
Dr. Bala Hota, Cook County Health and Hospitals System (CCHHS)
Dr. Josh Jones, Chicago Department of Public Health
Mike Jones, Healthcare and Family Services (HFS)
Judy Kauerauf, IDPH
John Lekich, OHIT/HFS
Lisa Kritz, Illinois Maternal and Child Health Coalition
Mary McGinnis, OHIT
Mohammed Shahidullah, IDPH
Julie Sharp, Kane County Health Department
Steve Seweryn, CCHHS
Renee Perry, HFS
Uche Onwuta, Kane County Health Department
Dr. Bill Trick, CCHHS

Introductions:
Chair **Mary Driscoll** opened the meeting at 3:30 pm, welcoming members of the Work Group. The meeting was hosted telephonically by OHIT; notice of the meeting and the agenda were posted on the OHIT website and onsite no later than 48 hours prior to the meeting. Roll was taken.

Illinois Health Information Exchange (ILHIE) Authority Board:
Dave Carvalho provided an update on the status of the ILHIE Authority Board and its most recent meeting on January 11, 2012.

The Board consists of eight appointed voting members and 5 State agency ex-officio members; the ninth position, that of the Executive Director is currently vacant, a job announcement has recently been posted. The Board Chair is Dr. Cheryl Whitaker of Merge HealthCare; Carvalho noted representation on the Board of four physicians as well as several other health care provider types and state and local public health.

Currently under consideration by the Board is the FY 2012 budget, staffing of the Executive Director position, building consensus on the ILHIE Business Plan, and registration of sub-state health information exchanges.

The Board announced the creation of the ILHIE Data Security and Privacy Committee. The Committee will serve in an advisory capacity to the ILHIE Authority Board on the policies of the Board with respect to the use and protection of health information, medical records, and other health data in the passions or control of the ILHIE. The Committee's role is to review, evaluate and recommend ILHIE data privacy and security policies, and to oversee the development of the new ILHIE data privacy and security policy recommendations with appropriate collaboration with State of Illinois stakeholder, policy developers and implementers. Individuals interested in seeking appointment to the Committee should contact Mark Chudzinski, OHIT General Counsel.

Office of Health Information Technology (OHIT) and ILHIE:
Mary McGinnis provided an update on recent activity by OHIT and the ILHIE.

McGinnis announced the availability of the first ILHIE service, ILHIE Direct Secure Messaging. ILHIE Direct Secure Messaging Solution enables providers to send patient health information via the internet in a secure and encrypted format from one provider to another with an ILHIE Direct address (a special e-mail address). ILHIE Direct will be offered to Illinois licensed health care providers at no cost through 2012.

McGinnis announced the selection of InterSystems Corporation as the vendor assisting the state to develop the technology infrastructure for the Illinois Health Information Exchange. The Exchange will connect physicians and hospitals electronically, enabling the secure exchange of patient health records statewide. The selection of InterSystems Corporation is the result of a competitive bidding process that sought industry leaders in health information technology.

Public Health Node:
Dr. Bala Hota provided an update on the status of the Public Health Node (the "Node").

The Public Health Node will support providers' submission of public health data to the Illinois Department of Public Health (the "Department"). The initial Use Cases for the Node are driven by the Meaningful Use Stage 1 public health reporting objectives. The Node will be offered as a Department service and hosted on the ILHIE.

The Node recently achieved Office of the National Coordinator EHR product certification for both electronic laboratory reporting (ELR) and immunization reporting. The Node will submit public health data to the State on behalf of Eligible Professional and hospitals to meet Meaningful Use. An HL7 implementation guide is available for interested providers.

In the future, the Node will also support syndromic surveillance reporting and Healthcare Associated Infections reporting to the National Health Care Safety Network via Direct (currently in testing and PHIN-MS live data feeds.

Mary Driscoll added that the functionality enabled through the Node will assist the Department collect aggregate population health data. Use of the Node should be highly encouraged, especially among smaller providers with limited ability to submit appropriate HL7 messages to IDPH.

Syndromic Surveillance
Dr. Craig Conover provided an update on the status of syndromic surveillance reporting.

Dr. Conover discussed the planned implementation of syndromic surveillance data collection enabled through the Centers for Disease Control's (CDC) Biosence. The Biosence 2.0 release utilizes cloud computing, reducing the infrastructure costs while maintaining scalability, and will be offered at no cost to state and local health jurisdictions. The solution supports health departments with multi-level reporting at the federal, state, and local levels.

Dr. Conover also referenced the recently released PHIN-MS syndromic surveillance emergency room and urgent care implementation guide which includes minimum syndromic surveillance data standards to support syndromic surveillance reporting.

INEDSS:
Judy Kauerauf provided an INEDSS update.

There are currently 16 providers in full scale production for ELR, 33 are sending lead data only, 21 are testing, 14 are discussions with IDPH, and 19 are gathering information prior to commencing the testing process.

Mary Driscoll confirmed that it not the Department's responsibility to provide written verification of receipt of a test from providers trying to meeting Meaningful Use; it is the provider's responsibility for attestation.

I-CARE:
Robin Holding provided an I-CARE update.

Currently, 190 providers have tested for immunization reporting; of those 170 have passed with 37 providers moving into production. New submissions have resulted in the addition of 32,000 patient records to the I-CARE system.

The next meeting of the ILHIE Public Health Work Group will occur in February 2012.

Meeting adjourned at 4:30pm.